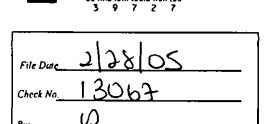
Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

Filing Period: Januar FORM MUST BE TYPED		2 mmg 2 cc. 950.00			
1. Corporate ID No.	2. Nume of Co	•	•	•	
39727	LAIRES A	AND SON AUTO REPAI	R, INC.	_	_
3. Sireei Address Principal 158 WATERMAN A'		·	City EAST PROVIDENCE	State RI	<i>Ζφ</i> 02914
4. Business Phone No. 4014340570		5. State of Incorporat RHODE ISLAN			6. SIC Code 8953
7. Brief Description of the C ENGAGE IN TEE BU	•	Conducted in Rhode Island DUCTING AUTOMOTIVE R	BPAIRS		
8. NAMES AND ADDI President Name ANTONIO A. LAIR Street Address 158 WATERMAN AV	ES	OFFICERS ("X" BOX FOR A	ITTACHMENT)   FILL IN SPACE  Nice President Name  JOSEPH P. LAIRES  Street Address  158 WATERMAN AVENU		TTACHMENTS
City EAST PROVIDENCE Secretary Nume JOSEPH P. LAIRE		Ζφ 02914	City EAST PROVIDENCE Treusurer Nume ANTONIO A. LAIRES	State RI	Zip 02914
Sireei Address 158 WATERMAN AV	ENUE		Street Address 158 WATERMAN AVENU	IE .	
Ciņ EAST PROVIDENCE	State RI	7.iφ 02914	City EAST PROVIDENCE	State RI	<i>Zip</i> 02914
9. NAMES AND ADDI Director Name ANTONIO A. LAIR Street Address 158 WATERMAN AV	ES	PIRECTORS ("X" BOX FOI	RATTACHMENT)   FILL IN SPACE Director Name JOSEPH P. LAIRES Street Address 158 WATERMAN AVENU		ATTACHMENTS
City EAST PROVIDENCE Director Nume NONE Street Address	State	7.ip	City EAST PROVIDENCE Director Nume NONE Street Address	State	Zip
Ciny	State	Zip	City	State	Zip
10. SHARES AUTHOI AUTHORIZED SHARES	RIZED ("X" BOX F	OR ATTACIIMENT)	11. SHARES ISSUED ("X" BO ISSUED SHARES	X FOR ATTACHMEN	77) 🗆
Number of Shares	Class/Series	Par Value	Number of Shures	Class/Series	Par Value
1,000	COMMON	NO PAR VALUE	800	COMMON	NO PAR VALUE



FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained ferein are true and correct. Print or Type Name of Officer Form 630 12/01



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) I. Corporate ID No. 2. Name of Corporation 39727 Laires and Son Auto Repair, Inc. 3. Street Address Principal Business Office State 158 WATERMAN AVENUE EAST PROVIDENCE RI 02914 4. Business Phone No. 5. State of Incorporation 6. SIC Code 4014340570 RHODE ISLAND 8953 7. Brief Description of the Character of Business Conducted in Rhode Island CONDUCTING AUTOMOTIVE REPAIRS 8. NAMES AND ADDRESSES OF THE OFFICERS (X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name ANTONIO A. LAIRES JOSEPH P. LAIRES Street Address Street Address 158 WATERMAN AVENUE . 158 WATERMAN AVENUE City City State Zip State Ζip BAST PROVIDENCE R.I. R.I. 02914 EAST PROVIDENCE 02914 Secretary Name Treasurer Name ANTONIO A. LAIRES JOSEPH P. LAIRES Street Address Street Address 158 WATERMAN AVENUE .158 WATERMAN AVENUE Cin State 'Cin Zio Ζφ State EAST PROVIDENCE R.I. 02914 EAST PROVIDENCE R.I. 02914 9. NAMES AND ADDRESSES OF THE DIRECTORS CX" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Director Name ANTONIO A. LAIRES JOSEPH P. LAIRES Street Address Street Address 158 WATERMAN AVENUE 158 WATERMAN AVENUE City State 7.ip ·City State 7ip EAST PROVIDENCE 02914 R.I. EAST PROVIDENCE R.I. 02914 Director Name Director Name NONE NONE Street Address Street Address Cin 7ф State 740 10. SHARES AUTHORIZED ("X" BOX FUR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Par Value Class/Series Number of Shares Class/Series Par Value 1,000 COMM NO PAR VALUE 800 COMMON NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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*39727 DBC 01/06/04 10:31:05 AM*	and that all s
File Date	You
Check No.	Signature of (
18 200 11	Print or Type
FOR SECRETARY OF STATE USE ONL	3 <u>1. 1. 1</u>
AN .	Title of Office

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Hox Sieves 1-19-04
Sknaure of Officer Date

Print or Type Name of Officer

Form 630 12/01

#### INSTRUCTIONS FOR FILING

rior to submitting the statement for filing, it is recommended that you call the Corporations Division at (401) 222-3040 to verify that the information required in items 2 and 4 of the preceding form currently appears in the corporate records of the Secretary of State. If the information is inconsistent with the records of this office, the statement will be returned.

- 2. It is required by law to provide a street address in item 3 of the preceding form in order to provide the public with notice of a physical location at which process, notice or demand required or permitted by law may be served on the registered agent. A statement submitted with a post office box address only will not be accepted for filling.
- The statement must be signed on behalf of the corporation by its president or a vice president.
- 4. The change of address of the registered office or the appointment of a new registered agent, or both, as the case may be, shall become effective upon the date of filing with the Secretary of State.
- The fee for filing the Statement of Change of Registered Agent by the Corporation is \$10.00, and payment should be made payable to the Rhode Island Secretary of State.

NOTE: If a registered agent changes the agent's business address to another place within the state, the agent may change the address and the address of the registered office of any corporation of which the agent is a registered agent by completing the statement below instead of the preceding form, and submitting same for filling, without fee. Again, it is recommended that you call the Corporations Division prior to submitting the statement to verify that the information required in item 2 below currently appears in the corporate records of the Secretary of State. As required by law, you must provide a street address in item 3 below.

No Filing Fee ID Number: 39727

#### STATEMENT OF CHANGE OF REGISTERED OFFICE BY THE REGISTERED AGENT

Pursuant to the provisions of Sections 7-6-13(d) or 7-6-78(d) of the General Laws, 1956, as amended, the undersigned registered agent submits the following statement for the purpose of changing the agent's business address and the address of the registered office of the corporation named herein to another place within the state:

- 1. The name of the corporation is <u>LAIRES AND SON AUTO REPAIR</u>, INC.
- 2. The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

1481 WAMPANOAG TRAIL, EAST PROVIDENCE, R.I. 02915

3. The address of the NEW registered office is: 349 WARREN AVENUE, EAST PROVIDENCE, R.I. 02914

4. A copy of this Statement has been mailed to the corporation.

Date: JANUARY 29, 2004

PAUL G. BETTENCOURT

Print Name of Registered Agent

Signature of Registered Agent

FEB 18 2004

By COM



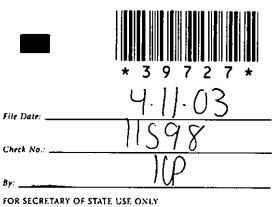
Edward S. Inman, III. Secretary of Stat Corporations Divisio. 100 North Main Street, Providence, RI 02903-133, 401-222-304

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PLEASERIAD INVIRCE HOSS

FORM MUST BE TITED OR PRINTEI	D IN RI ACID				
i. Corporate ID No.	2. Name of Corpora	ation			
39727	•	Son Auto Repair, Inc.			
1. Street Address Principal Business Op 158 Waterman Ave	ffice		cm East Providence	State RI	zip 02914
t. Business Phone No. 434-0570		5. State of Incorporat RHODE ISLA			6. SIC Code <b>8953</b>
P. Brief Description of the Character of Engage in the bu		in Rhode Island			0333
B. NAMES AND ADDRESSI President Name Antonio A. Laire		ICERS ("X" BOX FOR AT	TACHMENT) FILL IN SPACES BE Vice President Name Joseph P. Lai	FORE USING ATTA	CHMENTS
ireel Address 158 Waterman Ave	nue		Street Address 158 Waterman	Avenue	
City East Providence	State RI	zip 02914	cuy East Providence	State RI	<i>zip</i> 02914
ecretary Name Joseph P. Laires			Tieasurer Name Antonio A. La	ires	
itreet Address 158 Waterman Ave	nue		Street Address 158 Waterman	Avenue	
East P roivdence	State RI	71p 02914	chy East Providence	State RI	7.1p 02914
P. NAMES AND ADDRESSE Director Name Coseph P. Laires Street Address 158 Waterman Ave		ECTORS ("X" BOX FOR	ATTACHMENT) FILL IN SPACES  Director Name Antonio A. La  Street Address  158 Waterman		ACHMENTS
City	State	Zip	City	State	Zip
East Providence	RI	02914	East Providence	RI	02914
Director Name None			Director Name None		•
treet Address			Street Address		
Tity	State	Ζίρ	City	State	Zip
O. SHARES AUTHORIZED	("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHMEN	
lumber of Shares	Cluss/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM NO PAR VALL	JE		800	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truster



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Interior Laines.

Antonio A. Laires, President

Print or Type Name of Officer

ANTONIO LAIRES

Signature of Officer



Edward S. Inman, III. Secretary of Stat Corporations Division 100 North Main Street, Providence, RI 02903-133; 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1 Corporate ID No 2 Name of Corporation

39727		Laires ar	nd Son Aut	o Repair, Inc.			1	•		•	
3. Street Address Pro	incipal Business G	ffice			Ci	Ŋ		State		Zip	
4 Business Phone N	Waterman -0570	Avenue	5	State of Incorpora		East Pr	ovidence		RI	029: 6 sic	
7. Brief Description		f Business Conduc	ted in Rhode Is								
8. NAMES AN President Name	D ADDRESSI				TTACHMEN		N SPACES BE	FORE USING	; <b>атта</b> снм	ENTS	
Anto Street Address	onio A. La	aires			511	Jose cet Address	ph P. Lai	res			
158 City	Waterman	Avenue State	Zı	r	Ci		Waterman	Avenue State		715	
East Secretary Name	Provider	ıce	RI	0.2		East	Providen	ce	RI		02914
Jose Street Address	eph P. Lai	ires			\$20	Anto	nio A. La	ires			
158	Waterman	Avenue State	Ζι	r	Çi		Waterman	Avenue State		Zip	
East 9. NAMES AN Ducctor Name	: Provider D ADDRESSE		RI IRECTORS				Providen UN SPACES E		RI NG ATTACH	MENTS	02914
Jose	eph P. Lai	ires			Str	Anto cet Address	nio A. La	ires			
158	Waterman	Avenue State	Zi <sub>l</sub>	p	<b>C</b> ia		Waterman	Avenue State		Zip	
East	Provider	nce	RI	029	914 <sub>- Di</sub>	East rector Name	Providen	ce	RI		02914
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lity		State	Zij	יי	Cit	'y		State		Zip	
IO. SHARES AT	UTHORIZED	(*X* BOX FOR A	TTACHMENT	<b>7</b> .1		. SHARES 1	ISSUED (*x* )	BOX FOR ATTA	AGHMENT)		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Number of Shares

800



File Date:

Check No. \_

Number of Shares

1,000 COMM NO PAR VALUE

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct

Class/Series

Common

Antonio A. Laires, President Print or Type Name of Officer

BAITAINIA LAIRES

Par Value

No Par Value



Corporations Divisi 100 North Main Street, Providence, RI 02903-13 401-222-30

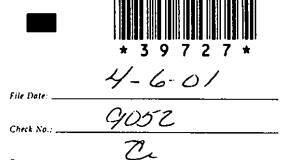
### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

401-222-30

7 11111X 7 C711011.	january 1-march i	ring rec. 330.00			UNSURUC
(FORM MUST BE TY	PED IN BLACK)				
1. Corporate ID No. 3972	7 Laires	<sup>oration</sup> and Son Auto Repair	, Inc.		
3. Street Address Princi	pal Business Office		City	State	Zip
158	Waterman Avenue		East Providence	RI	02914
4. Business Phone No. 434-	0570	5. State of Incorporation RHODE ISLAND			6. SIG Code <b>8953</b>
7. Brief Description of t	the Character of Business Conducte	d in Rhode Island			
Enga	ge in the busines	s of conducting aut	omotive repairs		
8. NAMES AND President Name	ADDRESSES OF THE OF	FICERS ("X" BOX FOR ATTACH!	MENT) FILL IN SPACES BE Vice President Name	FORE USING ATTA	CHMENTS
Anto Street Address	nio A. Laires		Joseph P. Laires Street Address		
158	Waterman Avenue		158 Waterman Aver	nue	
City	State	Zip	City	State	Zip
East Secretary Name	Providénce	RI 02914	East Providence	RI	<u>0</u> 2914
•	ph P. Laires		Antonio A. Laires	,	
Street Address	F		Street Address	•	
158	Waterman Avenue		158 Waterman Aver	nue	
City	State	Zip	City	State	Zip
East Provi	dence RI	02915	East Providence	RI	02915
9. NAMES AND Director Name	ADDRESSES OF THE DI	RECTORS ("X" BOX FOR ATTAC	CHMENT) FILL IN SPACES I	BEFORE USING ATT	TACHMENTS
Jose	ph P. Laires		Antonio A. Laires	3	
158	Waterman Avenue		158 Waterman Aver	nie	
City	State	Zip	Gity	State	Zîp
East Provi	dence RI	02915	East Providence	RI	02915
None			None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUT	"HORIZED (*x* box for a	TTACHMENT)	11. SHARES ISSUED (*X*	BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Volue

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste

800



1000 NO PAR VAL COM

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Common

No Par Value

Antorio daires /-/

Antonio A. Laires, President

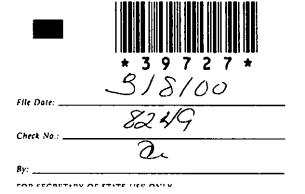
Print or Type Nau of Officer

James R. Langevin, Secretary of St. Corporations Divisi 100 North Main Street, Providence, RI 02903-13

# 401-222-30

1000 NO PAR VAL C	OM		800	COMMON	NO PAR VALUI
Sumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
IO. SHARES AUTHORIZED	("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*x* 1 ISSUED SHARES	BOX FOR ATTACHMENT)	
City	State	Ζίρ	City	State	Zip
treet Address			Street Address		
NONE			NONE		
EAST PROVIDENCE	R.I.	02914	EAST PROVIDENCE	R.I.	02914
City	State	Zip	City	State	Zip
Director Name JOSEPH P. LAIRES itreet Address 158 WATERMAN AVEN			Director Name ANTONIO A. LARIES Street Address 158 WATERMAN AVEN	3	
EAST PROVIDENCE  NAMES AND ADDRESS	R.I. Es of the dire	02914 CTORS (*X* BOX FOR ATTA)	EAST PROVIDENCE  CHMENT) FILL IN SPACES B	R.I. SEFORE USING ATTACH	02914 IMENTS
158 WATERMAN AVEN	State	Zip	City	State	Zip
JOSEPH P. LAIRES	1112		ANTONIO A. LAIRES  Street Address  158 WATERMAN AVEN		
EAST PROVIDENCE	R.I.	02914	EAST PROVIDENCE	R.I.	02914
158 WATERMAN AVEN	UE State	Zip	158 WATERMAN AVEN	IUE State	Zip
ANTONIO A. LAIRES			JOSEPH P. LAIRES Street Address	n.v.	
ENGAGE IN THE BUS B. NAMES AND ADDRESS President Name			MENT) FILL IN SPACES BEF Vice President Name	FORE USING ATTACHM	ENTS
(401) 434–0570 Bilef Description of the Character o	f Business Conducted in	RHODE ISLAND Rhode Island			8953
158 WATERMAN AVEN	UE	5. State of Incorporation	EAST PROVIDENCE	R.I.	02914 6. SIC Code
39727 . Street Address Principal Business O		Son Auto Repair	, Inc.	State	Zip
FORM MUST BE TYPED IN BLAC. Corporate ID No.	K)  2. Name of Corporati	on .			
PROFIT CORPO	-March 1	Filing Fee: \$50.00		2000-	PH M RI M INSTRUCTION

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trusti



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, an that all statements contained herein are true and correct.

Signature of Officer

Print or Type Name of Officer **PRESIDENT** 

ANTONIO A. LAIRES



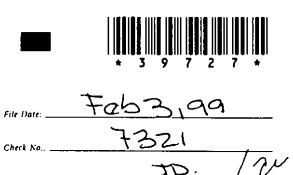
James R. Langevin, Secretary of Sta Corporations Divisit 100 North Main Street, Providence, RI 02903-13, 401-222-30

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

1999 STOP

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 39727 Laires and Son Auto Repair, Inc. 3. Street Address Principal Business Office State Zip EAST PROVIDENCE RI 02914 158 WATERMAN AVENUE 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 8953 401-434-0570 7. Brief Description of the Character of Business Conducted in Rhode Island ENGAGE IN THE BUSINESS OF CONDUCTING AUTOMOTIVE REPAIRS 8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name 1 Vice President Name ANTONIO A. LAIRES JOSEPH P. LAIRES Street Address Street Address 158 WATERMAN AVENUE 158 WATERMAN AVENUE Zip City 02914 02914 EAST PROVIDENCE RI EAST PROVIDENCE RΙ Secretary Name Treasurer Name JOSEPH P. LAIRES ANTONIO A. LAIRES Street Address Street Address 158 WATERMAN AVENUE 158 WATERMAN AVENUE City Chy 02914 E'ST PROVIDENCE 02914 RΙ EAST PROVIDENCE RΙ 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name JOSEPH P. LAIRES ANTONIO A. LAIRES Street Address Street Address 158 WATERMAN AVENUE .158 WATERMAN AVENUE City City State 02914 02914 EAST PROVIDENCE RI EAST PROVIDENCE RI Director Name Director Name NONE NONE Street Address Street Address Cite State ZIP City State Zip 10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUID SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series 1000 NO PAR VAL COM 800 COMMON NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

ANTONIO A. LAIRES

PRESIDENT



James R. Langevin, Secretary of Stu Corporations Divisi 100 North Main Street, Providence, RI 02903-13

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

RHODE ISLAND

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

- 1. Corporate ID No.

2. Name of Corporation

39727

Laires and Son Auto Repair, Inc.

3. Street Address Principal Business Office City 158 WATERMAN AVENUE EAST PROVIDENCE 4. Business Phone No. 5. State of Incorporation

Zip

02914

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RI 02914 6. SIC Code

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02914

8953

State

State

**AVENUE** 

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7. Brief Description of the Character of Business Conducted in Rhode Island

ENGAGE IN THE BUSINESS OF CONDUCTING AUTOMOTIVE REPAIRS

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name

RΙ

RΙ

RI

ANTONIO A. LAIRES

(401) 434-0570

Street Address

158 WATERMAN AVENUE

City

EAST PROVIDENCE Secretary Name

JOSEPH P. LAIRES

Street Address

158 WATERMAN AVENUE

City

EAST PROVIDENCE

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

JOSEPH P. LAIRES

Street Address

158 WATERMAN AVENUE City

EAST PROVIDENCE

Director Name

NONE

Street Address

City

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

1000 NO PAR VAL COM

Class/Series

State

Par Value

Zip

Zip

City

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

JOSEPH P. LAIRES

EAST PROVIDENCE

158 WATERMAN

EAST PROVIDENCE

ANTONIO A. LAIRES

EAST PROVIDENCE

158 WATERMAN AVENUE

ANTONIO A. LAIRES

158 WATERMAN AVENUE

Street Address

Treasurer Name

Street Address

Director Name

Street Address

Director Name

Street Address

NONE

City

City

City

ISSUED SHARES

Number of Shares

Class/Series

State

State

Par Value

Zip

800

COMMON

NO PAR VALUE

This report must be signed in lnk by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trust

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, an that all statements contained herein are true and correct.

ANTONIO A. <u>LAIRES</u> Print or Type Name of Officer

PRESIDENT



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

#### ROFIT CORPORATION ANNUAL REPORT 1997

iling Period: January 1–Mo	rch 1 🔸	Filing Fee: \$50.00
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(FORM MUST BE TYPED IN BLACK)

CHY

Secretary Name

1. Corporate ID No. 2. Name of Corporation

39727 Laires and Son Auto Repair, Inc. 3. Street Address Principal Business Office

City State 158 WATERMAN AVENUE EAST PROVIDENCE R.I. 02914 4. Business Phone No. 5. State of Incorporation 6. SIC Code

RHODE ISLAND 8953 (401) 434-0570

7. Brief Description of the Character of Business Conducted in Rhode Island

ENGAGE IN THE BUSINESS OF CONDUCTING AUTOMOTIVE REPAIRS

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name Vice President Name

ANTONIO A. LAIRES JOSEPH P. LAIRES Street Address Street Address

158 WATERMAN AVENUE 158 WATERMAN AVENUE

Zip City 215 EAST PROVIDENCE R.I. 02914 EAST PROVIDENCE 02914 R.I.

Treusurer Name

JOSEPH P. LAIRES ANTONIO A. LAIRES

Street Address Street Address

158 WATERMAN AVENUE 158 WATERMAN AVENUE

City State 7.10 EAST PROVIDENCE 02914 R.I. EAST PROVIDENCE R.I. 02914

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name

JOSEPH P. LAIRES ANTONIO A. LAIRES Street Address Street Address

158 WATERMAN AVENUE 158 WATERMAN AVENUE

7.ip

EAST PROVIDENCE 02914 R.I. EAST PROVIDENCE R.I. 02914 Director Name Director Name NONE

NONE Street Address Street Address

City State Zig City State Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTTHORIZED SHARES ISSUED SHARES

Number of Shares Class/Series Par Value Number of Shores Class/Series

1000 NO PAR VAL COM 800 COMMON NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined

this report, including any accompanying schedules and statements, and that all spatements contained herein are true and correct,

ire of Officer

ANTONIO A. LAIRES Print or Type Name of Officer

#### **PROFIT CORPORATION ANNUAL REPORT**

1996



State of Rhode Island and Providence Plantation James R. Langevin, Secretary of State

Corporations Division

100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-30c

Filing Period: January 1-March 1

		PI FASE TYPE OR	PRINT IN BLACK INK.		
PRPORATE ID NO.	2. NAME OF CORPORATION	·	THE IN DEADY HER.		<del></del> ,
39727	Laires	and Son Auto	Popair Inc		
TREET ADDRESS PRINCIPAL BUSINESS OFFICE	1	and son Auto	Repair, Inc.	STATE	72º CÓO:
			<b>5</b>	SIAIC	ar wee
158 WATERMAN A	VENUE		EAST PROVIDENCE	R.I.	02914
USMESS PHONE NO.		5. STATE OF INCORPORATION			6. SIC CODE
(401) 434-0570		RHODE I	SLAND		8953
RIEF DESCRIPTION OF THE CHARACTER OF BUS	TIVESS CONDUCTED IN PHODE IS				0 /2-
ENGAGE IN THE		<del></del>	COMOTIVE REPAIRS		
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	T D C C				
ANTONIO A. LA	LKES	····	JOSEPH P. LAIRES		
	WENTE			ii e	
158 WATERMAN A	AVENUE	ZP 000€	158 WATERMAN AVEN	UE I STATE	Z1P CODE
AST PROVIDENCE	R.I.	02914	EAST PROVIDENCE		1
RETARY NAME		1 02314	TREASURER HAVE	R.I.	02914
JOSEPH P. LAII	RES		ANTONIO A. LAIRES		
EET ADDRESS		<del></del>	STREET ADDRESS	<del></del>	·
158 WATERMAN A	AVENUE		158 WATERMAN AVEN	IIE.	
	STATE	ZIP CODE	CITY CITY	STATE	ZPP CODE
EAST PROVIDENCE	R.T.	02914	EAST PROVIDENCE	l RT	02914
	9 . N A I		ESSES OF THE DIRE		4 <del></del>
ECTOR NAME			DIRECTOR NAME		
JOSEPH P. LAII	RES		ANTONIO A. LAIRES		
EET ADORESS		<del></del>	STREET ADDRESS	<del></del>	
158 WATERMAN A	AVENUE		158 WATERMAN AVEN	UE	
	STATE	ZIP CODE	αιν	STATE	ZIP CODE
EAST PROVIDENCE	R.I.	02914	EAST PROVIDENCE	R. I.	02914
CTOR HAVE			DIRECTOR NAME		
NONE			NONE		
EET ADDRESS			STREET ADORESS	<del></del>	
NONE	Cenim		NONE	- Porter	*****
NONE	SIATE	ZP CODE	αίν	STATE	ZIP COOE
NONE	NONE	NONE	NONE	NONE	NONE
	- · ·	ARES AUTHOR	IZED AND ISSUED		
	AUTHORIZED SHARES			ISSUED SHARES	· ·
	CLASS / SERIES	PAR VALUE	MUMBER OF SHARES	CLASS / SERIES	PAR VALUE
NUMBER OF SHARES			800	COMMON	NO PAR VALUE
	VAL COM			COLTION	IND LWE AWTOR
NUMBER OF SHARES	VAL COM	<del></del>	·	<del></del>	
	VAL COM	<del></del>			
	VAL COM				
	VAL COM				

File Date:

Check No:

By:

2/23/96 3916 (B)/IP

Under penalty of perjury, I declare and affirm that I have examined the report, including any accompanying schedules and statements, and the all statements contained herein are true and correct.

Signature of Officer

DOCCINCMT

ANTONIO A. LAIRES

Print or Type Name of Officer

2/22/96/0

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335

(401) 277-3040

#### ANNUAL REPORT

Please Type or Print

File Annually - Jan 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0039727 Name of Corporation: Laires and	Annual Report for the year: 1995 Son Auto Repair, Inc.
Business entity organized under the laws of the State of:RHODE For foreign entity, address and telephone number of principal off	ISLAND Business Entity is (check one):
	Brief statement of the character of business conducted in Rhode Island:
Phone:	
Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):	ENGAGE IN THE BUSINESS OF CONDUCTING AUTOMOTIVE
	REPAIRS
158 WATERMAN AVENUE	
EAST PROVIDENCE, RI 02914	
(401) 434-0570 Phone:	
**************************************	
IHE NAW	ES OF THE OFFICERS ARE;
	FET ADDRESS CITY/STATE ZIP CODE WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
VICE PRESIDENT STR	LET ADDRESS CTITY/STATE ZIP CODE
JOSEPH P. LAIRES 158	WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
	EET ADDRESS CITY/STATE ZIP CODE WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
	WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
**************************************	WATERMAN AVENUE, EAST PROVIDENCE, RE 02914
THE NAME	S OF THE DIRECTORS ARE:
	EET ADDRESS CITY/STATE ZIP CODE WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
NAME STR	EET ADDRESS CITY/STATE ZIP CODE
ANTONIO A. LAIRES 158	WATERMAN AVENUE, EAST PROVIDENCE, RI 02914
NAME STR	EET ADDRESS CITY/STATE ZIP CODE
NUMBER OF SHARES AUTHORIZED	NUMBER OF SHARES ISSUED AND OUTSTANDING
Number of Shares Class/Series	Number of Shares Class/Scries
Eli En	•
1000 COMMONI L. L.	* 800 COMMON
Date: 5/13 , 1995 MAR 1 4 1995	Ву:
By EL 3615	Intonio farres
By CL 3615	PRESIDENT PROPRIET
***************************************	TITLE OF OFFICER SIGNING
DESIGNATED REGISTERED	OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

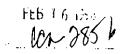
# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS OFFICE OF THE SECRETARY OF STATE

100 North Main Street, Providence, Rhode Island 02903-1335 401-277-3040

#### Corporate ID: <u>0039727</u>

Annual Report for the year: 1994

Name of Busines	s Entity:		ıto Repair, Inc		
Business entity organized un Poderal Taxpayer Identificati			Business Entity is (ch		***************************************
For foreign entity, address a	nd telephone number of pri		1   Professional Servi	ration (See RIGL Chapte re Corp. (See RIGL Cha Company (See RIGL 7-1)	pter 7-5 ()
			Name, title and mails communications may	g address of contact pers be directed	on to whom
			PAUL O. BETTENC	OURT, ESQUIRE	
Phone			1481 WAMPANOAG	TRAIL.	
			EAST PROVIDENCE	i, RI 07915	
Address and telephone of the entity in Rhode Island (Provi					
158 WATERMAN AVENUE	H.				
EAST PROVIDENCE, RE	72914			character of business con	
				JSINESS OF CONDUCT	TING 
(401) 434-0570	·		AUTOMOTIVE REP.		
<b>Т</b> юте				<u>AUGUST 15, 1986</u> to do business in Rhode (	sland (if foreign entity)
() CHIEF EXECUTIVE OF ANTONIO A. LAIRE	THE FICER OR [XX] PRESIDE S	NT (Check One) 158 V	STREET ADDRESS /ATERMAN AVEN	CITYISTA UE, EAST PROVI	TE ZIP CODE DENCE, RI 0291
() CHIEF EXECUTIVE OF ANTONIO A. LAIRE () CHIEF OPERATING OF JOSEPH P. LAIRES () CUSTODIAN OF RECOI JOSEPH P. LAIRES	THE FICER OR [XX] PRESIDE S FICER OR [XX] VICE PR	ESIDENT (Check One) 158 V ESIDENT (Check One) 158 V Y (Check One)	STREET ADDRESS /ATERMAN AVEN	CITY/STA UE, EAST PROVI CITY/STA UE, EAST PROVI	TE ZIP CODE DENCE, RI 0291- TE ZIP CODE DENCE, RI 0291- TE ZIP CODE
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(I) CHIEF EXECUTIVE OF ANTONIO A. LAIRE I) CHIEF OPERATING OF IOSEPH P. LAIRES II CUSTODIAN OF RECOFORM P. LAIRES ANTONIO A. LAIRE ANTONIO A. LAIRE ANTONIO A. LAIRE IOSEPH P. LAIRES NAME IOSEPH P. LAIRES NAME IOSEPH P. LAIRES ANTONIO A. CONSERIES PAR VALUE OR	THE FICER OR [XX] PRESIDE ES FICER OR [XX] VICE PR RDS OR [XX] SECRETAR FICER OR [XX] TREASURES THE ES THE	NT (Check One) 158 V ESIDENT (Check One) 158 V Y (Check One) 158 V RER (Check One) 158 V NAMES OF THE STREET ADDRES 158 WATERM STREET ADDRES 158 WATERM	STREET ADDRESS /ATERMAN AVEN STREET ADDRESS STREET AN AVENUE, EASS STREET STREET PAR VALUE OR	CITY/STA UE, EAST PROVI CITY/STA UE, EAST PROVI CITY/STA UE, EAST PROVI UE, EAST PROVI E: CITY/STATE IT PROVIDENCE, CITY/STATE IT PROVIDENCE, CITY/STATE SISSIED AND OUTST	TE ZIP CODE DENCE, RI 0291  ZIP CODE RI 02914  ZIP CODE RI 02914
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(I CHIEF EXECUTIVE OF ANTONIO A. LAIRE I) CHIEF OPERATING OF JOSEPH P. LAIRES II CUSTODIAN OF RECOFF OF THE PROPERTY OF THE PR	THE FICER OR [XX] PRESIDE SS FICER OR [XX] VICE PR RDS OR [XX] SECRETAR FICER OR [XX] TREASURES THE FICER OR [XX] TREASURES THE FICER OR [XX] TREASURES THE FICER OR [XX] TREASURES FAR VALUE	NT (Check One) 158 V  Y (Check One) 158 V  Y (Check One) 158 V  NAMES OF THE  STREET ADDRES 158 WATERM  STREET ADDRES 158 WATERM	STREET ADDRESS /ATERMAN AVEN STREET ADDRESS AN AVENUE, EAS SAN AVENUE, EAS STREES PAR VALUE OR WITHOUT PAR  SO SO SH	CITY/STA UE, EAST PROVI  CITY/STA UE, EAST PROVI  CITY/STA UE, EAST PROVI  CITY/STATE UE, EAST PROVI  CITY/STATE IT PROVIDENCE, CITY/STATE IT PROVIDENCE, CITY/STATE  CITY/STATE  SSISSIPD AND OUTST  SOO COMMON  NO PAR VALUE  FICER SIGNING	TE ZIP CODE DENCE, RI 02914 ZIP CODE RI 02914 ZIP CODE RI 02914 ZIP CODE



PLEASE NOTE: If the Corporation has changed its registered office and/or resident agent, Form 9 or Form UL/O3 most be filed.

### State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0039727	_	Annual Re	port for the year 1993
FIRST: The name of th	e corporation is LAIRES A	ND SON AUTO REPAIR	I, INC.
SECOND: It is incorpo	rated under the laws of Rho	ode Island	
automotive repairs.	business, briefly stated, is corporation, address of its		
FIFTH D '11	a 'a Mhada Tala da aga a		
02914 Business address	s in Rhode Island <u>158 wate</u>	erman Avenue, East Prov	idence, Rhode Island
SIXTH: Names and add	lresses of its directors and o	fficers:	(Attach rider if necessary)
Name	Office A	ddress (including number, street, zip code)	
ANTONIO A. LAIRES	Director	158 Waterman Ave., E	. Providence, RI
JOSEPH P. LAIRES	Director	158 Waterman Ave., E	. Providence, RI
	Director		
ANTONIO A. LAIRES	President	158 Waterman Ave., E	. Providence, RI
JOSEPH P. LAIRES	Vice-President	158 Waterman Ave., E	. Providence, RI
JOSEPH P. LAIRES	Secretary	158 Waterman Ave., E	. Providence, RI
ANTONIO A. LAIRES	Treasurer	158 Waterman Ave., E	. Providence, RI
SEVENTH: Number of	Shares authorized:		Par Value
No of Shares	Class	Series 19	of statement that shares are without par value
1000	Common	no Pala	No Par
EIGHTH: Number of S	hares issued:	AMONSIO	Par Value of statement that
No. of Shares	Class	Series	shares are without par value
800	Common		No Par
Dated: $2 - 8$	, 19 <u>93</u>	LAIRES AND SON A	UTO REPAIR, INC.
		By: Antonio	Taires
	real	Title: President	
	Rec's & MIND FEB 1	11(10) <u>1103(00)</u>	

Filing Fee-\$50.00

To be filed annually between January 1st and March 1st

# State of Rhode Island and Providence Plantations Corporations division 100 North Main Street PROVIDENCE, RHODE ISLAND 02903

Corporate ID 39727	******	Annual Report for the year	1992	
FIRST: The name of the cor	poration is	LAIRES AND SON AUTO REPAIR, INC.		
Second: It is incorporated	under the laws of	Rhode Island		
THIRD: Character of business, briefly stated, is automotive repairs			of conducting	
FOURTH: If foreign corpora	tion, address of its pr	rincipal office		
FIFTH: Business address in	Rhode Island	158 Waterman Ave., East Pro	ovidence, RI 02914	
SIXTH: Names and addresse	es of its directors and	Officers: Address (including number, s	(Attach rider if necessary) street, zip code)	
ANTONIO A. LAIRES	Director	158 Waterman Ave., East Pr	ovidence, RI 02914	
JOSEPH P. LAIRES	Director	158WatermanAve,EastPr	ov.idence,RI02914	
	Director			
ANTONIO A. LAIRES	President	158.Waterman.Ave., East Pr	ovidence, RI 02914.	
JOSEPH P. LAIRES	Vice Preside	ent158 Waterman Ave, East Pr	ovidenceR1.02914	
JOSEPH P. LAIRES	Secretary	158 Waterman Ave East Pr	ovidence,RI.02914	
ANTONIO A. LAIRES	Treasurer	158.Waterman.Ave., East.Pr	ovidence, RI02914.	
SEVENTH: Number of Shar	es authorized:		Par Value or statement that shares are without	
No of Shares	Class	Senes PAID	par value	
1000		APR 2 9 1992	No Par	
Eіднтн: Number of Share	s issued:	SEC'Y OF STATE	Par Value or statement that shares are without	
No of Shares	Class	Scries	par value	
800			No Par Value	

President

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION DEDVIDENCE PHODE ISLAND 02003

-0-		. RHODE ISLAND 02903	1001
Corporate ID 397	27	Annual Report	1991 for the year
•		IRES AND SON AUTO REP	· · · · · · · · · · · · · · · · · · ·
Successor It is income	sowated under the laws of	Rhode Island	
SECOND: It is incorp	orated under the laws of.		usiness of conducting
THIRD: Character of automotive repair	f business, briefly stated, is	i co engage in the 2	
FOURTH: If foreign of	corporation, address of its	principal office	
Fifth: Business add	ress in Rhode Island	8 Waterman Avenue, Ea	st Providence, RI 02914
SIXTH: Names and a	addresses of its directors a		(Attach rider if necessary
Antonio A. Laires	SDirector	158 Waterman A	venue, East Providence, RI
Joseph P. Laires	Director	158 Waterman A	venue, East Providence, RI
	Director		
Antonio A. Laires	SPresident	158 Waterman A	venue, East Providence, RI
Joseph P. Laires	Vice Presi	158 Waterman A	venue, East Providence, RI
Joseph P. Laires			venue, East Providence, RI
Antonio A. Laires	Secretary Treasurer	158 Waterman A	venue, East Providence, RI
Seventh: Number of	of Shares authorized:		Par Value
No. of Shares	Class	Addres of	or statement that shares are without par value
1000		LEBIR 1991	E No Par
Еіднтн: Number of	Shares issued:	PAID 1991 FEB 12 1991 SEC'Y OF STAT	Par Value or statement that
No of Shares 800	Class	Series	shares are without par value No Par
Dated 2-	6 19 91	LAIRES AND SON A	UTO REPAIR, INC.
		(Name of Corporation)	
(Report must be si	uned by an officer)	President And	onic A Laines

To be filed annually between January 1st and March 1st

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

. 00	777 P	ROVIDENCE, RE	ODE ISLAND	02903		1990	157
Corporate ID 39			ES AND SO	ON AUTO R	EPAIR, I	year NC.	DI
FIRST: The nam	e of the corporation	n 15				*,**,	4****************
SECOND: It is in	corporated under the	he laws of	Rhode I	sland	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••••	*******************************
	-		to enga	ge in the	busines	s of conduct	ing
THIRD: Characte	er of business, brief pairs	ly stated, is		-	•••••		
FOURTH: If fore	ign corporation, ad	dress of its pr	incipal offi	ce	•••••••••••••••••••••••••••••••••••••••		
F1FTH: Business	address in Rhode I	sland 158	Waterman	Avenue,	East Pro	vidence, RI	02914
SIXTH: Names a	and addresses of its	directors and	officers:	Address	(including num	(Attach rid	ler if necessary
Antonio A. Lai	ires	Director	158	Waterman	Avenue,	East Provid	lence, RI
Joseph P. Lair	res	Director	158	Waterman	Avenue,	East Provid	lence, RI
		Director	********				*******
Antonio A. Lai	ires	President	158	Waterman	Avenue,	East Provid	lence, RI
Joseph P. Lair	res	Vice Preside	158	Waterman	Avenue,	East Provid	lence, RI
Joseph P. Lair	res			Waterman	Avenue,	East Provid	lence, RI
Antonio A. La	ires	Secretary Treasurer	158	Waterman	Avenue,	East Provid	lence, RI
SEVENTH: Numl	ber of Shares autho			Series		Par Valu or statement shares are wi par valu	that thout
1000					PAID IAR U / 15	No Par	
Eighth: Numbe	er of Shares issued:			W	IAR U / F	Par Valu STAT or statement shares are wi par valu	e that thout
No. of Shares 800	Class			Series SE	, , ,	par valu No Par	
Dated	19	90	LAIRES	S AND SON	AUTO RE	PAIR, INC.	
			Name of Corpor	ation)	************		*******
		В	By		· <u>.</u>		

Title

(Renort must be signed by an officer)

Füing Fee \$15.00

. , **t** . .

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

	PROVIDENCE, RHODE	SLAND 02903	1989
orate ID 39727	LAIRES A	Annual Report for the year ND SON AUTO REPAIR, INC.	••••
FIRST: The name of the corpor	ration is		
SECOND: It is incorporated un	Rho	de Island	*********
SECOND: It is incorporated un	der the laws of to	engage in the business o	f conducting
THIRD: Character of business. automotive repairs		,,	
FOURTH: If foreign corporation	on, address of its princip	oal office	
FIFTH: Business address in Ri		erman Avenue, East Provid	donce RI N2914
FIFTH: Business address in Kr	TOOR ISland		
SIXTH: Names and addresses	of its directors and offi		(Attach rider if necess
Antonio A. Laires	_	158 Waterman Avenue, E	ast Providence, R
Joseph P. Laires		158 Waterman Avenue, E	ast Providence, R
		158 Waterman Avenue, E	
AA	President		
Joseph P. Laires		158 Waterman Avenue, E	
Joseph P. Laires	Secretary	158 Waterman Avenue, i	ast Providence;
Antonio A. Laires	Treasurer	158 Waterman Avenue,	East Providence, I
SEVENTH: Number of Share		· ·	by: Value or sulternent that snates are without you value
No. of Sheres 1000	Class	Sener	No Par
EIGHTH: Number of Shares	s issued:	्र । १३६५	Par Valut or summent that stures are without par value
No. of Snares 800	Ciass	Senes	No Par
		LAIRES AND SON AUTO REF	DATO TNO

To be filed annually between January 1st and March 1st

# State of Rhode Island and Frovidence Flantations CORPORATIONS DIVISION PROVIDENCE, RHODE ISLAND 02903

Corporate ID.	727	Annual Report for the year 1988				
First: The name of the	he corporation isLA	LRES AND SON AUTO R	EPAIR, INC.			
SECOND: It is incorpo	rated under the laws o	f Rhode Island				
THIRD: Character of b	ousiness, briefly stated,	is to engage in the	business of conducting			
automotive repairs						
FOURTH: If foreign co	rporation, address of it	s principal office	······································			
FIFTH: Business addre	ss in Rhode Island .1.58	3 Waterman Avenue.	East Providence, RI 02914			
SIXTH: Names and add	dresses of its directors a		(Attach rider if necessary) ss (including number, street, zip code)			
Antonio A. Laires	Director	158 Waterman	Avenue, East Providence, RI			
Joseph P. Laires	Director	158 Waterman	Avenue, East Providence, RI			
	Director	••••••				
Antonio A. Laires	President	158 Waterman	Avenue, East Providence, RI			
Joseph P. Laires	Vice Pres	ident <u>158 Waterman</u>	Avenue, East Providence, RI			
Joseph P. Laires	Secretary	158 Waterman	Avenue, East Providence, RI			
Antonio A. Laires	Treasurer	158 Waterman	Avenue, East Providence, RI			
SEVENTH: Number of S	Shares authorized:		Par Value or statement that			
No. of Shares	Class	Series	shares are without par value			
1000		13.25g	No Par			
EIGHTH: Number of Sh	nares issued:	િ ઇ <b>⊍</b> 19 <b>83</b>	Par Value or statement that			
No. of Shares	Ciass	/ The Series	shares are without par value			
800			No Par			
Dated 3 - 4	1988	LAIRES AND SON (Name of Corporation)	AUTO REPAIR, INC.			
		Ву	N F			
(Do- not miles be stoned	d by an officer)	Title Procident	Interio Daires			

To be filed annually between January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 39	127		Annual R	eport for the yea	r1987	• • • • • • • • • • • • • • • • • • • •
FIRST: The name of	the corporation is	LAIRES A	ND SON AUTO	O REPAIR, INC	•	·····
Second: It is incorp	orated under the law	s of Rho	de Island			······································
THIRD: Character of	business, briefly state	ed, isto	engage in	the business	of conducting	]
automotive repair	'S		••••		····	· · · · · · · · · · · · · · · · · · ·
FOURTH: If foreign of	corporation, address of	of its principa	l office			
FIFTH: Business add	ress in Rhode Island	158 Wate	rman Avenu	e, East Provi	dence, RI 029	914
Sixth: Names and a	ddresses of its directo	ors and office		dress (including number,	(Attach rider if	necessary)
Antonio A. Laires	Direc	tor .1.5	8.Waterman	.Avenue, East	Providence,	RI
Joseph P. Laires	Direc	tor 15	8 Waterman	Avenue, East	Providence,	RI
	Direc	tor	••••	••••••••••••••••••••••••••••••	•••••	• • • • • • • • • • • • • • • • • • • •
Antonio A. Laires	Presid	dent 15	8 Waterman	Avenue, East	Providence,	RI
Joseph P. Laires	Vice I	President	8 Waterman	Avenue, East	Providence,	RI
Joseph P. Laires	Secret	tary 15	8 Waterman	Avenue, East	Providence,	RI
Antonio A. Laires	Treas	urer 15	8 Waterman	Avenue, East	Providence,	RI
SEVENTH: Number of	f Shares authorized:				Par Value	
No. of Shares	Class	PAL	Series		or statement that shares are without par value	
1000						^
		MAY 13				
Eighth: Number of	Shares issued: S	SEC'Y. OF S	STATE		Par Value or statement that shares are without	Q.
No. of Shares	Class		Series		par value No Par	124 19
Dated ACAN 2	<i>8</i> , 19 <sup>87</sup>	LAI	RES AND SO	N AUTO REPAIR	, INC.	
Za.cu	<del></del>	(Name of	Corporation)			••••••
		By	ularia	Towers		

Procident